



Statement of the Minority Veterans of America¹
provided for an Open Legislative Hearing of the
Committee on Veterans' Affairs, Subcommittee on Oversight & Investigations
United States House of Representatives

Wednesday, September 22, 2021

Chairman Pappas, Ranking Member Mann, and Distinguished Subcommittee Members,

We collectively represent the minority veteran community through the Minority Veterans of America (MVA). Our organization works to create belonging and advance equity for our nation's most marginalized and historically underserved veterans—those of color, women, LGBTQ-identifying, and (non)religious minorities. Our position affords us the honor of representing more than 10.2-million veterans and of directly serving thousands of veteran-members across 49 states, 3 territories, and 3 countries, many of whom have never been, and may never be, recognized or heard individually. We strive to be the most diverse, inclusive, and equitable veteran-serving organization in the country, and believe that through creating an intersectional movement of minority veterans, we can build a collective voice capable of influencing critical change.

In our work, we routinely encounter minority veterans, including LGBTQ-identifying persons, who feel they do not deserve to call themselves veterans and who do not feel respected as veterans. Not only is their service often unrecognized by the American public, but within our own community they have been ostracized by structural forces and social attitudes that are antithetical to the values of our military and democracy. We are appreciative of the efforts that this Committee has taken to acknowledge and address those realities. We would specifically like to express our deepest appreciation to the efforts of Chairman Takano, Chairman Pappas, and many of their colleagues for their painstaking efforts in ensuring that several veteran stories were read aloud on the chamber floor in celebration of the tenth anniversary of the repeal of “Don’t Ask, Don’t Tell.” As we will further discuss below, such visibility and acknowledgments are crucial

¹ Verbal Testimony is being provided by Lindsay Church, Executive Director. Written Testimony was provided by Andy Blevins, Policy Director, and Kai River Blevins, Associate Policy Director. All three attributors identify as part of the LGBTQ veteran community: Lindsay is a gender-nonconforming and queer Navy veteran, Andy is a queer Navy veteran, and Kai is a nonbinary and queer Army veteran.

in restoring the community's broken trust and confidence. We have provided additional stories as an Appendix to this testimony, portions of which have already been shared with many of your offices.

We are grateful for the platform you are providing and for the opportunity to provide our community's perspectives and concerns through this Hearing. It is our hope that, together, we can ensure all our siblings-in-arms are justly served and equitably supported.

**Commission to Study the Stigmatization, Criminalization, and Ongoing
Exclusion and Inequity for LGBTQ Servicemembers and Veterans Act (H.R. 1596)**

We applaud Chairman Takano and Representative Brown's efforts to establish a Commission to investigate these apparent and documented concerns² within the LGBTQ military and veteran community. We have consistently testified about the need to begin compiling comprehensive data on the entire minority veteran community, but especially of our LGBTQ-identifying siblings.³ The Department⁴ and this legislative body have taken extraordinary steps this past year to address these concerns, and the implementation of this Commission will further assist in gathering necessary data and recollections to ensure equitable and just service for this growing subgroup of the overall community.

Alongside our endorsement, we have several recommendations that we hope are taken into consideration to further embolden this Bill and future legislative efforts:

- (1) Presently, the Bill appears to be hyper focused on the now-defunct "Don't Ask, Don't Tell" (DADT) and transgender bans on open military service. While a significant portion of the data and recollections will likely be pulled from individuals that served under these two oppressive frameworks, it would be a disservice to exclude those that served under similar constraints prior to the enactment of those two military bans. The conditions of service and treatment of actual or perceived members of the LGBTQ community likely varied tremendously within the aforementioned bans themselves, but also between prior exclusionary policies. Purposeful inclusion of those who served during and were affected by these prior policies is a necessary extension to ensure the intended effects of this Bill.

² Draper, D.A., Austin, J., Husain, Q.A., Apter, J., et. al. (2020). *VA health care: Better data needed to assess the health outcomes of lesbian, gay, bisexual, and transgender veterans*. Report to Congressional Committees. United States Government Accountability Office. Available at: www.gao.gov/assets/720/710278.pdf.

³ See generally www.minorityvets.org/testimony.

⁴ Shipherd, J. (2020). LGBTQ care in the VA. *She wears the Boots: A podcast for Women Veterans*. Spreaker, iHeart Radio. Podcast Interview. Available at: www.spreaker.com/user/11014928/womenshealth-lgbtq-shipherd-wmusic-maste.

- (2) In Section 2(b)(1), we would recommend “[. . .] history of military policy regarding homosexuality [. . .]” be changed to “[. . .] history of LGBTQ policing [. . .].” This recommendation will ensure that the outreach, gathered testimonies, and impact examinations mentioned throughout the Bill are as inclusive as possible of individuals that do not identify as LGBTQ but were nevertheless impacted by the policies being assessed. We are particularly interested in ensuring that the experiences effeminate men, masculine women, and others that were erroneously discharged due to their perceived sexual orientation or gender identity are considered and evaluated to address the lack of services and endured trauma that these veterans have faced.
- (3) Section 2(b)(1)(A) lists many of the important regulations and events that have shaped LGBTQ military history, though has also left many other, equally important, events out. We understand that this list is not meant to be exhaustive but would impress the importance of also examining: the 1916 Articles of War, and its 1920 revision; the 1919 Newport sting operation conducted under then-Assistant Secretary of the Navy Franklin Roosevelt;⁵ the 1951 Uniform Code of Military Justice (UCMJ) adoption; the 1953 Executive Order 10450; and the 1993 Department of Defense Directive 1332.14.
- (4) We would recommend that the ten instances of “Armed Forces” be replaced with “Uniformed Services.” We presently have eight uniformed services,⁶ but only six of those are distinguished as “Armed Forces.”⁷ The National Oceanic and Atmospheric Administration (NOAA) and the commissioned corps of the Public Health Service (PHS) are summarily discluded. Under Title 38 of the Uniformed Code,⁸ all full-time members of the uniformed services are entitled access to veterans’ benefits administered through the Department.⁹ Under the same logic presented in our second recommendation for this Bill, further inclusion of the experiences of NOAA and PHS service members, whether or not they were personally subjected to the above-mentioned and formalized bans from service, will ensure that this piece of legislation is as comprehensive as possible.

⁵ Smith, S. (2008). 1919 Newport sting operation that targeted gay sailors, ended in scandal. *Stonewall Gazette*. Available at: www.stonewallgazette.com/2008/01/1919-newport-sting-operation-that.html.

⁶ The eight uniformed services include, in order of precedence, Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard, the Public Health Service Commissioned Corps, and the Oceanic and Atmospheric Administration Commissioned Corps.

⁷ The six armed forces include, in order of precedence, Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard.

⁸ 38 U.S.C. 2, 21, 24. See also Wright, S.F. (2021). NOAA and PHA veterans are entitled to benefits administered by the Department of Veterans Affairs (VA). *Service Members Law Center*. Reserve Organization of America. Available at: www.cdn.ymaws.com/www.roa.org/resource/resmgr/LawReviews/2021/21003-LR.pdf.

⁹ *Id.*

- (5) We would recommend that the membership of the Commission include representation from the Coast Guard, NOAA, and PHS; veteran-attorneys that assist with discharge upgrades and name changes; and representatives from the Boards of Corrections of Military and Naval Records. Their inclusion, whether in official or *ex officio* capacities will provide the comprehensive and needed insight into existing and potential processes and frameworks.

Justice for Veterans Act (H.R. 2385)

We appreciate Representative Brownley’s efforts in the introduction of this Bill and particularly for the inclusion of Section 3, which relays the recognition of and remorse for the inappropriate separations that pregnant women and mothers endured prior to February 23, 1976. Such acknowledgments and statements from Congress, and the Department, are essential in restoring the faith and confidence that many women veterans have lost in expecting equitable and just treatment and access to due services and benefits. We reiterate our endorsement for its swift passage.

We would recommend that Section 4(a)(1), identifying disaggregated data that shall be collected through the GAO study, also include “time in service.” We are concerned that many of the women that may have been inappropriately discharged because of their parenthood are being denied necessary and due services and benefits. As this subset of the population continues to advance in age, those services and benefits increasingly become life-saving and essential to expressing gratitude for their honorable and selfless military service. In furtherance of Section 3 of this Bill, information concerning their time in service would allow for veteran service organizations, the Department, and this body to advocate for the provision of these life-saving and affirming benefits and services.

Additionally, while outside of the scope of this Bill, we recommend further studies which, following Section 4(a)(4), would assess how such discharges or separations impacted employment, housing, and credit/lending, given that negative characterizations of service are known to impact civilian life in myriad ways.

Honoring All Veterans Act (H.R. 2806)

We are proud to reiterate our support for Representative Rice’s Bill concerning the Department’s mission statement. The gender-neutral terminology of this new mission statement

acknowledges the diversity of the veteran community, including family members and caregivers who have supported their veterans. We have no recommendations at this time.

Voices for Veterans Act (H.R. 3930)

We appreciate the efforts of Representative DelBene for the introduction of this Bill, especially for the intentional inclusion of many veterans that identify under the LGBTQ umbrella but whose identities are infrequently presented in such a defined manner. Such statements and definitions are essential in ensuring that our nation's LGBTQ-identifying service members become increasingly comfortable and confident in the Department's ability to serve and support them. We do, however, have concerns in the positioning of this Bill and as such tentatively¹⁰ endorse this piece of legislation.

It is our understanding that the intention behind this Bill is to ensure comprehensive and intersectional¹¹ identities within the Department's existing advisory councils. We continue to advocate for this intention but acknowledge that the mere inclusion of intersectional identities will not directly address the deep harm many in the minority veteran community have faced during and following their military service. Intersectional frameworks are purposefully designed to allow for the understanding of compound discriminations and disadvantages that a person may experience, especially the complexity of prejudices and privileges that our constituencies may encounter while moving through societal and Departmental systems.¹² However, we feel that this Bill will dilute the strength that comes from such specialized perspectives and circumvent the intention in affirming the value of distinct and intersectional identities. Instead, we would support legislative efforts to enhance distinct, identity-focused Committees and their capacities for collaboration.¹³

It would be our recommendation that the Advisory Committee on Minority Veterans' interest group¹⁴ remain specifically focused on racial and ethnic minorities, with the understanding, or express

¹⁰ While this Bill does not fully address the concerns of the standing Committees as we recognize them, it is imperative that LGBTQ identities are intentionally included to better advise the Secretary. Should H.R. 4845 (below) not move forward in the legislative process, we would re-direct our efforts to support H.R. 3930 while continuing to advocate for the re-positioning of the Committee and the establishment of independent, identity-focused advisory committees in subsequent legislation.

¹¹ Crenshaw, K. (2016). The urgency of intersectionality. *TEDWomen*. Podcast presentation. Available at: www.ted.com/talks/kimberle_crenshaw_the_urgency_of_intersectionality/up-next.

¹² Kort, J. (2019). Understanding intersectional identities: Defining or being defined by only one aspect of identity can be harmful. *Psychology Today*. Available at: www.psychologytoday.com/us/blog/understanding-the-erotic-code/201906/understanding-intersectional-identities.

¹³ See generally Blevins, K.R., & Blevins, A.L. (2021). Advocating for minority veterans in the U.S.: Principles for public policy. *Journal of Military, Veteran, and Family Health*. (Forthcoming). Early access release available at: www.doi.org/10.3138/jmvfh-2021-0024.

¹⁴ "[. . .] veterans who are minority group members [. . .]." See Public Law 103-466 § 510(A)(4)(b).

indication, that intersectionality shall be prioritized in identifying Committee Members and through related activities and reports. Alongside the Advisory Council on Women Veterans, and the advisory committee which would be created following the passage of H.R. 4845,¹⁵ the Secretary would have independent advisory councils for each of the major minority-identifying veteran subgroups, while still prioritizing the importance of acknowledging the compounding influence of intersectional identities.

To Establish an LGBTQ Advisory Committee (H.R. 4845)

We applaud Chairman Pappas for the introduction of this Bill and for his tireless dedication to supporting the LGBTQ military and veteran community. Echoing the comments that we made through our recommendations for H.R. 3930 above, the establishment of an LGBTQ-focused advisory committee would affirm the value of distinct, identity-focused experiences and increase the capacity of advisory members, without diluting the intentional efforts to include intersectional perspectives. We fully endorse this Bill and have several recommendations which we are confident will further strengthen the Chairman's intent behind this legislation.

- (1) In Section 2(b)(D), we would recommend the inclusion of women veterans alongside the racial and ethnic minority veterans that are identified in 38 U.S.C. 5 § 544. Like a person's racial or ethnic background, their actual or perceived gender identity is an important factor in how they understand themselves and in their resulting differential treatment within society.¹⁶
- (2) In Section 2(b)(E), we would recommend that special attention be provided to ensuring that veterans involuntarily separated under policies that preceded DADT and the transgender military ban be included. We would also recommend the intentional inclusion of veterans with diverse narrative reasonings for discharge and diverse discharge statuses. The Department must remain cognizant of the fact that many veterans discharged because of their actual or perceived identities or orientations were criminalized solely because they deviated from the societal norm. Knowledge of their post-service experiences and systems access, because of those bad paper discharges,¹⁷

¹⁵ We would also advocate for the establishment of an advisory committee that centers religious minorities.

¹⁶ See generally Millar, K., & Eastman, J. (2019). Double jeopardy: Minority stress and the influence of transgender identity and race/ethnicity. *Honors College and Center for Interdisciplinary Studies*. Available at: www.digitalcommons.coastal.edu/honors-thesis/327. See also Guadalupe, X. (2010). An exploration of the influences of race, class and gender identity on the help-seeking behavior of LGBTQ survivors of violence. *Virginia Commonwealth University*. Available at: www.scholarscompass.vcu.edu/etd/2142.

¹⁷ The term "bad paper discharge" colloquially refers to military discharge characterizations that not fully "Honorable." This includes characterizations listed as "Other Than Honorable: (OTH), "Bad Conduct Discharge" (BCD), and "Dishonorable

will be beneficial in ensuring the Department can equitably support these and similar underserved veterans in the future.

- (3) In addition to the *ex officio* members enumerated, we would recommend the inclusion representatives from the Department of Homeland Security, NOAA, and PHS; veteran-attorneys that assist with discharge upgrades and name changes; and representatives from the Boards of Corrections of Military and Naval Records. As discussed above, their inclusion will provide the comprehensive and needed insight into existing and potential processes and frameworks.
- (4) We would urge that the definition provided for the acronym LGBTQ be amended to mirror the definition provided in H.R. 3930. This change would ensure that gender diverse, queer, and intersex individuals are adequately represented.¹⁸ Underrepresentation of gender diverse individuals has historically been a barrier to understanding varied social determinants of health of non-cisgender populations¹⁹ and in equitably and justly re-structuring Departmental frameworks.

Every Veteran Counts Act (Draft Bill)

We are supportive of Representative Brownley’s comprehensive Bill to establish a nationally representative survey of veterans to be conducted every ten years. As noted in Section 2 of the Bill, survey data is crucial in informing policymaking, programs, and services for veterans. Given the necessity of holistic data collection for minority veteran communities, we appreciate the inclusion of various identity factors in the demographics. Additionally, we appreciate Section 3(c), which creates opportunities for enhancing the outcome of the survey, specifically the inclusion of various stakeholders throughout key stages of the survey process.²⁰ To aid in the realization of this Bill’s goals, we provide the following recommendations:

Discharge.” See Blevins, A.L., & Blevins, K.R. (2020). *It’s not ‘quality of life,’ it’s ‘life or death.’* Minority Veterans of America. Written testimony provided for the House Veterans Affairs Subcommittee on Disability Assistance and Memorial Affairs’ Hybrid Oversight Committee: Stuck in Red Tape—How VA’s Regulatory Policies Prevent Bad Paper Veterans from Accessing Critical Benefits. See also Blevins, A.L., Blevins, K.R., Perkowski, P.E., et al. (2018). *Freedom to serve: The definitive guide to LGBTQ military service*. OutServe-SLDN. Available at: www.modernmilitary.org/wp-content/uploads/2019/11/FREEDOM-TO-SERVE- - FINAL.pdf.

¹⁸ Representative DelBene’s legislation specifically identifies veterans that are lesbian, gay, bisexual, transgender, gender diverse, gender non-conforming, intersex, and queer.

¹⁹ Meerwijk, E.L., & Sevelius, J.M. (2017). Transgender population size in the United States: a meta-regression of populations-based probability samples. *American Journal of Public Health*, 107(2): 1-8.

²⁰ *Supra* Blevins & Blevins, 2021.

- (1) In Section 3(a), we recommend including in the study an element regarding debt and source of debt. Given the overwhelming student debt²¹ crisis²² and a long history of predatory lending practices of institutions targeting minority²³ and lower-class communities, this element would provide further information to aid legislative efforts and Department programs and services to assist veterans burdened by such debt.
- (2) In Section 3(a)(1), we recommend adding to “[. . .] biological sex [. . .]” the following qualifier: “[. . .] to include intersex individuals who may have been assigned either male or female at birth [. . .].”
- (3) In Section 3(a)(11), we recommend including homeless veterans, perhaps through reference to a collaboration with the annual Point in Time Count, administered by the Department of Housing and Urban Development.
- (4) In Section 3(c)(4), we recommend further defining “intersectional data” to ensure that the survey designers and administrators are fully aware of the minimum requirements intended, guaranteeing that “intersectional” and “ample” can be operationalized in the project to full effect.

To Establish a Center for LGBTQ Veterans (Draft Bill)

We support this draft Bill which would establish a Center for LGBTQ-identifying veterans. As a major population within the veteran community, and one that experiences barriers to access and disparities in care and services, the creation of a Center to centralize, spearhead, and provide expertise on sexual and gender minorities is a positive step toward substantive equity, justice, and inclusion efforts within the Department and the veteran community. In previous testimony for the Health Subcommittee, we have noted that the LGBTQ Health Program has had insufficient human resources, as a matter of policy, to provide necessary support to LGBTQ veterans through its Veteran Care Coordinators.²⁴ We are glad to see this being addressed in Section 324(d) of the amended United States Code, and we look forward to the beneficial impacts that this newly-formed Center will bring.

²¹ Oliff, P; Takyi-Laryea, A; Brees, S; Bhattarai, R. (2021). *Veteran Student Loan Debt Draws New Attention*. The Pew Charitable Trusts. Available at: www.pewtrusts.org/en/research-and-analysis/articles/2021/09/13/veteran-student-loan-debt-draws-new-attention.

²² Hess, AJ. (2020). *How student debt became a \$1.6 trillion crisis*. CNBC. Available at: www.cnn.com/2020/06/12/how-student-debt-became-a-1point6-trillion-crisis.html

²³ ACLU & MFY. (2015). *Here We Go Again: Communities of Color, the Foreclosure Crisis, and Loan Servicing Failures*. New York, NY: ACLU. Available at: www.aclu.org/report/here-we-go-again-communities-color-foreclosure-crisis-and-loan-servicing-failures.

²⁴ Blevins, A. (2021). *Statement of Andy Blevins, Minority Veterans of America*. Written testimony provided for the House of Representatives Veterans’ Affairs Committee, Subcommittee on Health, Open Legislative Hearing, July 14, 2021.

In addition to our endorsement, we would urge that the definition provided for the acronym LGBTQ be amended to mirror the definition provided in H.R. 3930.²⁵

SERVE Act (Draft Bill)

We applaud Representative Pappas' efforts to address the ongoing harm of unjust, and since repealed, policies regarding sexual orientation and gender identity in military service. In expanding the eligibility for benefits to those who were discharged due to actual or perceived sexual orientation or gender identity at any time during their service, this Bill brings relief to at least one million²⁶ people who have served in the Armed Forces over the past century.²⁷ We support this long overdue Bill and have one recommendation to strengthen its efforts.

We would advocate for the addition of an element which allows for flexibility in the determination of what constitutes a discharge by reason of "sexual orientation or gender identity." This is important given that not all narrative reasonings regarding such discharges are the same, that separation codes explicitly denoting sexual orientation or gender identity are not exhaustive or the only means upon by which such discharges are based, and that prejudice against non-cisgender and non-heterosexual individuals has resulted in negative characterizations of their actions which would not apply to their cisgender and heterosexual counterparts. As such, we believe that specific language should be included which ensures multiple avenues for assessing discharge by reason of sexual orientation or gender identity.

VA Inclusion, Diversity, Equity, and Access (IDEA) Data Improvement Act (Draft Bill)

We support Representative Takano's efforts to increase the collection of demographic data, particularly given how the current absence of particular aspects of demographic data—especially sexual orientation, transgender status, and intersex status—have deprived many minorities within the veteran community of the benefits and care which are afforded to their non-minority counterparts.²⁸ This is an important step forward in ensuring that the Department and other organizations serving veterans understand and are able to account for the diversity of the veteran community in their work.

Our primary recommendation is to include examples of demographic data that might realize the intentions of this Bill within Section 2(d)(1), such as those listed above. This would also have the benefit

²⁵ *Supra* Note 18.

²⁶ Blevins, A.L.; Blevins, K.R., Church, L. (2021). *Securing Equitable and Just Conditions for the Minority Veteran Community*. Minority Veterans of America. Written Testimony provided for the House of Representatives and Senate Committees on Veterans' Affairs Joint Session on VSO Legislative Priorities, March 3, 2021.

²⁷ *Supra* Blevins, Blevins, Perkowski, 2018.

²⁸ *Supra* Note 26.

of ensuring that future data collection within the Department include at a minimum these factors, and to hopefully influence other Federal agencies and veteran-related organizations that can contribute to data collection efforts to better serve minority veterans in a concerted effort.

Additionally, while we support the efforts of this Bill, we have reservations about the inclusion of the Department as a Designated Statistical Agency as outlined in Section 2(b). Section 3576 of title 44, United States Code, is part of a broader initiative within the “Foundations for Evidence-Based Policymaking Act of 2018,” which is structured to enhance Federal communications and collaborations between certain Agencies regarding industry and the workforce, to reduce paperwork and the duplication of efforts within the Federal Government, to improve projects based on Federal economics statistics, and to “increase understanding of the United States economy” for various purposes.²⁹ Given the overall purpose and prevailing structure of Section 3576, we feel that inclusion of the Department within this section of the United States Code may not achieve the goals of this Bill and could have unintended consequences. One such consequence would be to set a precedent for including other Federal agencies within the list of Designated Statistical Agencies, thereby shifting the central focus—and what we see as its merit—away from more general economic concerns and statistical data intended for the whole of the country which can then be used for particular populations, such as those served by the Department and this Committee. This would also, we believe, implicitly push data collection initiatives within the Department and within other Federal agencies toward statistical projects, having the unintended effect of deprioritizing the richness of qualitative studies which contribute so fundamentally to the efforts outlined in Section 2(d)(3) of this Bill.³⁰ To ensure that such problems do not arise, we recommend pursuing an alternative mechanism to ensure the sharing of demographics and other statistical information between the Department and other Federal agencies for the purposes outlined in this piece of legislation.

²⁹ See Public Law 115—435. Jan. 14, 2019.

³⁰ Since November 2020, we have participated in the Multi-Stakeholder Partnership of the VA’s “Enhancing Veteran Community Reintegration Research” (ENCORE) research project (IVI 19-487), led by Dr. Karen Besterman-Dahan. Based partly on this productive experience, we can attest to the importance of not only qualitative data collection, but also the style of inquiry that arises from researchers trained in qualitative research methods. This is not to reinforce a divide between qualitative and quantitative research, but to recognize the increasing move away from qualitative inquiry and toward quantitative inquiry given the realities of communicative structures and practices, the prioritization of econometrics in policy science, and the value afforded to the quantification of experience in a globalized, multicultural society. We see this prioritization of quantitative inquiry in policymaking as inextricable from the move toward statistical analysis at the expense of qualitative data collection and analysis, which informs our reservations regarding the inclusion of the Department in Section 3576 of title 44, United States Code.

In addition to the considerations mentioned for the above referenced Bills, there are several areas which we believe must be addressed to further the intended support we are securing for our LGBTQ-identifying veteran community.³¹

- (1) **Treatments for Substance Use Disorders.** Nearly one in five veterans living with post-traumatic stress are also battling a substance use disorder (SUD).³² There has been minimal research into SUD within the minority veteran community, though we are aware that LGBTQ veterans are at a higher risk for developing such disorders.³³ We urge the Committee and the Department to ensure comprehensive data collection is prioritized, to report on the deaths and known substance use disorders of veterans that have accessed Departmental services, and to enforce trauma-informed and culturally-resilient trainings for health care providers and clinical staff on a recurring basis.
- (2) **IVF and Surrogacy Programs.** Comprehensive reproductive healthcare extends beyond contraception and abortion, to include in vitro fertilization (IVF). Presently, the Department lists opposite-sex spouses as the only eligible candidates for IVF.³⁴ Many LGBTQ couples rely on this necessary form of healthcare to build their families. We urge the Committee and the Department to create opportunities for all veterans to access family planning services and procedures that are presently restricted.
- (3) **Mandated, Minority-Focused Training for VSOs and Department Staff and Contractors.** Our community has a long history of enduring discrimination within veteran-centered spaces, including Departmental environments. This effectively or constructively results in exclusion from needed social support and access to care. In addition to the strong anti-discrimination policies that are being instituted, it is crucial that the ignorance and misinformation about our communities is directly addressed through educative programming. Ongoing training should include cultural-competency components and identified best practices. We would urge the Committee and the Department to ensure that such training is developed and provided to all Departmental personnel during their onboarding and annually thereafter.

³¹ See also Church, L., Blevins, A.L., & Blevins, K.R. (2021). *Securing equitable and just conditions for the minority veteran community. Statement of Lindsay Church, presenting the organization's legislative priorities.* Minority Veterans of America. Congressional testimony provided for the House of Representatives and Senate Committees on Veterans Affairs' during the Joint Session VSO legislative priorities, March 3, 2021.

³² National Center for PTSD. (n.d.). PTSD and Substance Abuse in Veterans. US Department of Veterans Affairs. Accessed on February 28, 2021, at www.ptsd.va.gov/understand/related/substance_abuse_vet.asp.

³³ Kalin, NH. (2020). Substance use disorders and addiction: Mechanisms, trends, and treatment implications. *The American Journal of Psychiatry*, 177(11), 1015–1018. doi.org/10.1176/appi.ajp.2020.20091382.

³⁴ The veteran must also be capable of tying their infertility to a service-connected injury or condition.

(4) **Identification of post-traumatic stress caused by military systems.** Many minority veterans selflessly served under frameworks and regulations that personally and/or systemically criminalized crucial aspects of their identity or forced them to hide such factors to protect their lives and careers.³⁵ Such conditions and life-saving behaviors innately cause these veterans to develop post-traumatic symptoms during and after their military careers. This is particularly insidious when coupled with the knowledge that the sinister (and enduring) identification of LGBTQ-status as a severe mental illness discourages many from accessing mental health care. We would urge the Committee and the Department to establish frameworks which recognize the development and impact of post-traumatic stress brought on by the military itself.

The feedback provided above and further discussed in today's Hearing is meant to help ensure this legislative body continues to live up to the effective advocacy and support standards that they have been charged with in service to our veteran communities. Our feedback echoes the experiences of many minority veterans who have been excluded or underserved from the VA's care and support programs, whether intentionally or negligently. We believe that, as a country, we have made great progress in ensuring all veterans benefit from the work that this Committee is doing on their behalf.

Once again, we thank you for the opportunity to submit this written testimony and to provide verbal testimony during this Hearing. We look forward to continuing to work with you and your offices, and to support your efforts in serving our nation's minority veteran populations. If we can be of further assistance, please feel free to contact our Policy Director, Andy Blevins, directly, at ablevins@minorityvets.org.

Respectfully Submitted,

/s/
Lindsay Church
Executive Director

/s/
Andy Blevins
Policy Director

/s/
Kai River Blevins
Assoc. Policy Director

³⁵ E.g., serving under "Don't Ask, Don't Tell" and the ban on open transgender military service, serving within a unit that blatantly uses rhetoric and engages in practices that create a hostile environment, among others.

APPENDIX A: SELECTION OF LGBTQ VETERAN STORIES

Landon Marchant (they/them)

white, transgender, non-binary, queer

Air Force Veteran

Representative Neal (MA-1)

I enlisted under a six-year contract, full of optimism for what a career in the Air Force could bring. Twenty-two months later I found myself honorably discharged, driving home from Minot, North Dakota, with my belongings packed into duffle bags and the ramifications of undiagnosed PTSD hovering in the background. In under two years, I had experienced three sexual assaults and over eight months of non-stop sexual harassment. All of which was explained away as being for my own benefit and to rectify my perceived insecurities and weaknesses--namely, my gender identity and sexual orientation.

At the time I was presenting as female and went by a different name. I had enlisted in the Air Force to get out of my small rural Wisconsin hometown and to create a better future for myself. I knew deploying was a possibility, but I never expected the real threat to come from my wingmen. Because I served under Don't Ask Don't Tell, I wasn't able to explicitly tell my supervisor, Operations Special Investigations, or mental health providers the rationalizations my attackers shared on why they targeted me, or why the sexual violence I had experienced was so destabilizing. Even as my case went to court-martial, I could not speak openly. This inability to engage in meaningful and transparent dialogue prevented me from accessing the care that I needed and resulted in my career ending before it truly began.

My intent in sharing my story is not to speak negatively of the people who cared about me. Serving under "Don't Ask, Don't Tell" meant that I was able to forge strong friendships with other LGBTQ servicemembers, a group of individuals with shared ideals and experiences, and a cadre of friends that I would not have met had I not put on the uniform. My shop deduced that I was queer and tried to play matchmaker, introducing me to a Senior Airman in a neighboring office who was rumored to be a lesbian. After my case went to court-martial, I learned that my direct supervisor had indicated that he believed I didn't date men and blatantly stated that no one in my shop cared if I identified as LGBTQ. They just wanted me to be okay. My mental health providers came to similar conclusions and vocalized that the trauma I had experienced was compounded and aggravated by my inability to openly speak or identify. Despite their well-meaning intentions and the life-saving impact that this could have had for me. This information couldn't be included in any official reports, and it never came up in the associated trials. Being authentically myself was illegal and my chain of command and legal representation determined that I would be better served and protected if I hid this crucial aspect of my identity. My discharge was honorable, but the paperwork reads "inability to adapt," despite the contrary being true.

The impact of "Don't Ask, Don't Tell" did not end when I received my discharge paperwork, and it did not end when the ban was finally repealed, it has also impacted my post-military life. I was discharged less than two months before reaching the two-year minimum for full GI Bill eligibility. I have had to fight for my disability benefits while having inconsistent employment; nearly ten years after my discharge I was awarded 100% VA benefits, but the ruling is not backdated to my separation despite the clear documentation of untreated medical concerns and their ramifications on my personal, family, and professional lives.

I enlisted in the United States Air Force in the hopes of creating a better future for myself. This wonderful life I have painstakingly built since my separation is undoubtedly better than it would have been had I not enlisted at all. However, the cost of serving under this discriminatory ban was also greater and more difficult than anything I could have ever imagined. Being trans and queer is but a small facet of who

I am, but serving under “Don’t Ask, Don’t Tell” ensured that my identity was inseparable from my active-duty service and remains inseparable from my status as an honorably discharged veteran. My hope for sharing my story with you on the repeal anniversary is two-fold-first, that the necessary steps are taken to ensure no other service member will ever need to experience what my community has as they pursue military service, and, second, to give a voice to those that were removed from that service, or prevented from serving entirely, simply because their orientations and identities did not conform to what their service branch believed was best. Do not let this anniversary, a day to recognize sacrifice, change, and possibility, go to waste. Moving forward, we must ensure that every able, willing, and qualified individual is able to serve openly, fully, and authentically.

Hanna Tripp (she/her)

white, transgender, lesbian

Air Force Veteran

Representative Moulton (MA-6)

I graduated at the top of my class in a flight school that had over a 50% attrition; flew 20 combat missions in Iraq; and later brought back the remains of our fallen from Afghanistan. Objectively, I was a good Airman. However, nothing that I did do or could do would supersede the fact that I was trans. In coming out, my service to this country would have been made irrelevant simply by this one aspect of who I was. So, in order to remain, I chose to bifurcate myself; to project a façade of the kind of person the military expected me to be.

The catch 22 was that while I heard members of my squadron talk about how “the gays” would destroy our combat effectiveness, I was unable to demonstrate that it didn’t. This is the most enduring aspect of DADT for me. It was not that people like me were banned, it is that we were denied the opportunity to show our worth. Being trans in the Air Force in 2010 was to live two versions of a lie, the lie you showed to the world in denying this fundamental truth and the lie that you told to yourself by doing so.

It was not that the majority of my squadron was homophobic, I have learned of others who have come out since, it was that the entire argument was made moot by official policy. Trust is not easily earned and having been trusted with the lives of others, I became reticent to anything to jeopardize it. I did my service without anyone ever knowing I was trans, for doing otherwise would have felt like a betrayal of that trust. Not a single person I served with knew me as anything other than a straight male and few know otherwise even now. This is one of the most pervasive aspects of DADT for me in that almost a decade later I still feel compelled to hide this from them. Those whom I have since come out to have been overwhelmingly supportive, but ironically were hurt that I kept this from them.

There was also a feeling of betraying both me and the community. How can I expect change if I don’t have the courage to be the change I want to see? Why would those who had negative perceptions of “the gays” think any differently if I was too cowardly to show them? With absolutely no hubris, I can say that my service to this country was both valuable and needed. I enlisted in the middle of a war to serve in a career field that guaranteed I would be sent to the frontlines. I recognize the contributions I made, but I can't say I am proud of my service, as I failed to stand up for the very values that I was fighting for. What is strange to me is that being trans is such a small part of who I am, but because of DADT, it has become a large part of how my service is perceived.

I still feel the legacy of DADT even to this day. At the VA, I was denied emergency care for no other reason than I was trans. Even now, I remain cut off from most of the people I served with. When squamates died from suicide, when Iraq fell to ISIS, and while I battled my own experiences from the war; I did so alone. To this day, people with no service in the military still freely challenge the veracity of trans

service. For people such as myself, DADT meant that our accomplishments, our stories, and our service was hidden because we were forced to remain hidden.

Jon Hegwood (he/him)

bi-racial, cisgender, gay

Army Veteran, Spouse of Purple Heart recipient & Army Servicemember
Representative Strickland (WA-10)

I joined the military knowing, at least intellectually, that I couldn't show up as my authentic self however, it would take me several years of introspection to realize what impact this would have on my life. I told myself that it would be easy to navigate as a gay man since I grew up in the very rural and anti-gay western part of Texas, and by comparison this would be a proverbial "walk in the park."

When I had first heard the news that Don't Ask, Don't Tell would be repealed I was incredulous, and nearly in tears. It was almost unimaginable that this could actually occur within my lifetime, and I would be witnessing it firsthand. My then partner and I were both military and couldn't even so much as acknowledge our relationship in the workplace. The darker side of this otherwise heartening news is that in the coming months until it was fully repealed would feel like an even more hostile environment to navigate than it was previously. With DADT in place and it being the "status quo" for over a decade, I had the privilege of mostly flying under the radar of most who deemed those from the LGBT+ community as a benign part of the fighting force. Now with the repeal of DADT being at the forefront of media focus and the military's collective consciousness, it seems it all but painted a target on my back as I became the focus of everyone's ire that disagreed with the repeal that was looming on the horizon.

I now carry with me a sense of resentment towards the military because of the harassment, hazing, bullying, and discrimination I encountered while serving from those that I was supposed to trust my life with. To give you an idea of what that meant: ten years ago, I couldn't get married in my state. Ten years ago, I couldn't openly affirm my sexual orientation. Ten years ago, I couldn't give my partner a simple kiss in public. Ten years ago, it wasn't safe to walk down the street holding hands. Ten years ago, I had to choose between serving my country and my relationship.

Now, we might've made some progress as a society. Last month I celebrated 10 wonderful years with that same man I couldn't even acknowledge in the workplace 10 years ago. He is now my husband, and that same military that would've discharged him out a decade ago now honors our marriage and was very accommodating in granting a compassionate reassignment of duty location when I was diagnosed with stage three non-Hodgkin's lymphoma. This doesn't mean that homophobia simply disappeared, or that everyone suddenly had no issues with us simply existing as we are. Even to this day it's not entirely safe for us to hold hands out in public, and members of the LGBT+ community are still being actively discriminated against in our armed forces and in our society as a whole.

I would encourage our lawmakers to consider these perspectives and realize these issues still exist, even with our current legal protections. These issues didn't disappear overnight when Don't Ask, Don't Tell was repealed. LGBT+ members of our armed forces need and deserve greater protections granted so that they may continue to contribute to the greatness of our military as a fully-integrated and welcomed part of it rather than continuing to try and do so from the margins.

Ashley Carothers (she/her)

white, cisgender, lesbian

Air Force Veteran, former Army spouse
Representative Norton (DC)

During my Air Force career, I lived a double life. I was an actress portraying a straight Airman on a stage called life and behind closed doors a very broken human being that desperately just wanted to be herself. I was a lesbian in hiding. I was the Airman that did it all, scored as high as they could on tests, worked to know the job better than the rest and volunteer for everything that I could in hopes that my busy life would never uncover the truth. Behind the curtain I dated but relationships couldn't completely build because there was always a sense of getting caught especially in a mil-to-mil relationship. Supervisors constantly questioning you and trying to set you up with the new guy in the shop and always prying into why you constantly denied any male advances. The worst part was the feeling of always being alone while fending off the wolves (male Airman) and dodging sexual harassment and assault as a woman just trying to serve her country. I guess it made me stronger in a weird messed up way as I was able to provide support to others later in my career, support I never had.

While serving in Germany I had the privilege to be one of the chapter leaders for the then underground organization known as OutServe. Prior to the repeal of DADT we had a large number of LGBT service members all over the European theater that relied on each other for support and a sense of community. During this timeframe multiple individuals struggled further with their military leadership as those opposed to the repeal expressed their views verbally leaving many with anxiety about the future. There were many late-night phone calls trying to be the voice of reason in moments of doubt and desperation when options to turn to mental health professionals were nonexistent for fear of discharge. Not being able to fight for them and speak freely and openly to commands for support damaged individuals beyond repair. If anyone went to speak to a mental health professional and disclosed the fact that they identified as Gay, Lesbian or Bisexual they would be on the chopping block as they were serving under Don't Ask, Don't Tell. On top of that many served in career fields that they had to report any visit to a mental health professional further limiting these individuals who desperately needed assistance. These individuals had no one to turn to and suffered in silence. Most even after the repeal couldn't come out as Lesbian, gay or bisexual for fear of treatment from their superiors. Some suffered greatly by coming out to their commands as they had to work twice as hard to prove themselves and were often overlooked for promotion and awards.

Balancing my own life struggles and the struggles of those that looked to me for support was a pretty demanding time in my career. My career and health did suffer, but I often think about what life would have been like if I hadn't been able to give so much or if the military would have just let humans be humans by being their true authentic selves in the first place. The constant jokes, ridicule and mistreatment from superiors hasn't gone away. On this Anniversary I hope that those in charge will finally take the right steps and change the culture.

Stephanie Merlo (she/her)

bi-racial, cisgender, lesbian

Army Veteran
Representative Spanberger (VA-7)

A year after 9/11 happened I enlisted as an active-duty service member in the Army. My mom cried, my brother was proud, and I was honestly excited and scared both at the same time! Was I scared of deploying? Sure, a little. Was I afraid of failing? Of course! But my overall fear that consumed me beyond the point of depression was the fear of being "ousted" and discharged for being a lesbian. On February of

2004, that fear showed its face, and I was backed into a corner with deciding how I wanted to proceed with my military career.

When I got to my garrison unit in Germany, I was greeted with a slew of male soldiers who wanted to get to know the “new girl.” This came with taunts, sexual harassment, and rumors. I wanted to go home but couldn’t, so I decided to go down the hill to this little bar on post with a few of the other female soldiers to have a drink. We were 19, in Germany, it’s legal, I am stressed, so why not?

One drink led to 2, and then 3. Before I knew it, I was drunk and alone at a table with a young woman that treated me with kindness. She offered to walk me to my barracks room, which I agreed to because I did not want to go alone, and I have no clue where the group I came with went.

She led me out of the bar and pulled me to the side of the building where she then sexually assaulted me. I went to my room feeling disgusting, and full of shame and guilt. I knew what happened was not ok, but I also knew I could never say anything to anyone about what happened. I felt if I did this, then I would put myself in a situation of being questioned about my sexuality and my hopes of having a career in the military were done.

The night I was assaulted was the night a piece of my identity died. I took that piece of me and buried it so it would never surface. I lived every day feeling shame for who I was and what had happened to me. I wanted to talk to someone so bad. I hated that I couldn’t! But, to no avail, rumors began to spread about me that I was a lesbian, and if you are not dating men or picking up on their advances, you might as well be.

It was so hard to walk into work every day with my SFC looking at me and questioning every female soldier that walked in with his glancing eyes. I felt anxious every day I went into work, and I dealt with that for 2 years. It made me physically and mentally ill. I couldn’t eat, I would drink more, and I started to isolate myself more and more.

Once I got home after being discharged, I was no longer the same person who enlisted 4 years prior. My mom begged me to see a therapist because of my constant anger outburst, so I did. With years of therapy, I finally accepted myself for who I was and there is nothing to be ashamed of.

Had DADT not been a thing, the night that I was assaulted would have gone a lot differently and that piece that I buried wouldn’t be so damaged. I will never regret my decision to join the Army, but I still live with the regret of not allowing myself to live my truth.

Lindsay Church (they/them)

white, nonbinary, queer

Navy Veteran

Representative McEachin (VA-4)

I served in the Navy from 2008-2012. A 3rd generation sailor and the 6th in my family to serve in the military, I was deeply proud of my service and that of my family. My mother, a Navy veteran herself, instilled in me a life of honor, courage, commitment, and integrity. When I was graduating high school, I enlisted in the Navy, knowing this was my only way to go to college and believing it was imperative upon my generation to serve in the War on Terror. As I spent my final months in the Delayed Entry Program, I came out of the closet as LGBTQ. I knew that I couldn’t serve if I wasn’t able to be my authentic self, so I decided that service wasn’t for me and left before going to boot camp. I spent the next few years wandering through my new adulthood, still longing to be a part of the military, even if it didn’t allow queer folks like myself to serve openly.

In 2008, I joined the Navy for a second time where I would serve for four years before being medically retired. I served all but 3 months of my time under the military's discriminatory Don't Ask, Don't Tell policy. I could tell you a lot of stories that range from bullying and reprimand for my nonbinary appearance, failed relationships due to the fact that I had to hide them at every turn, and exploitation by other service members threatening to tell my secret if I didn't continue to date them. Even as I spent months recovering from life-changing injuries as a result of my service, I was made to suffer alone because my relationships were legally prohibited.

As I've unpacked my service as a veteran, I look back at the intense scars that Don't Ask, Don't Tell inflicted on my life. In conversations with other Don't Ask, Don't Tell survivors, I've come to realize that serving under this policy has left a generation of queer service members with intense trauma and a fracture in our identities. For veterans like myself, we were often faced with a choice upon leaving the military and coming to the veteran community - be a veteran or be queer because you can't be both here.

It's taken me nearly a decade since leaving the service to find healing and to engage in healthy relationships. It's required intentional work and years of therapy to get here, all because someone believed that the Don't Ask, Don't Tell policy was a good compromise to the "problem" of queer service members. I couldn't speak out against this policy when I was in uniform, so it is imperative for me today to remind this body that policies like Don't Ask, Don't Tell cause widespread trauma and harm to generations of service members who fought for our country but were forced to remain voiceless. Moral injury will follow with each of us for the rest of our lives.

My story of service was tarnished by Don't Ask, Don't Tell. Every day, I carried a lie while attempting to live up to the Navy's core values of honor, courage, and commitment. I am deeply proud of the years of my life I gave to serving my country, that will never change. The scars I carry because of that service will also never change. Though they may fade, they will never be forgotten.

Nathan Porter (he/they)
white, gay, cisgender man
actively-serving Air Force
Representative Doyle (PA-18)

"In the Air Force, we hold ourselves to a higher standard, and right now, I don't think your lifestyle meets that standard."

That's what I was told by an Air Force flight doctor, after having to come out to him because of a medication I'm on that prevents me from contracting HIV. He was referring to me being a sexually active gay man. This was not the only thing he said to me that stuck like a needle in my side. He also laughed at me and didn't care about other relevant health issues he should be concerned about when clearing me to fly as a boom operator. He had already made up his mind what he was going to do with me before I even walked in that door.

This was in 2019 - eight years after Don't Ask, Don't Tell was repealed.

Many people ask... "what more do you need? DADT was repealed, and you can get married now too. What more could you want?"

For years I have lived a double life - starting with the conservative blue-collar town I grew up in where friends and family have cut communications with me because of who I am. This mindset of masking

and hiding who I was followed me into an 11-year long career in the Air Force. The repeal of DADT came with a sigh of relief - but that only changed policy; it didn't change the mindsets of leadership and the lived experiences of LGBTQ folx.

For a long time, I questioned whether hiding myself was justified, and I either ignored or was oblivious to the devastating effect it had on my mental and physical health. Trying to live my authentic life at home but putting on a mask when I went to work where I spent most of my day. For some reason, I didn't realize that looking over my shoulder every time I was out with my boyfriend and avoiding every restaurant within a 15-minute drive from base was not normal.

Experiences like the one above with the base's flight doctor reassured me that I was doing the right thing - Pull myself up by the bootstraps and trudge on, no matter the consequence. That all came crashing down last year when I realized I couldn't deal anymore. I knew something was wrong, but I had been living this life for so long, I didn't see how it was effecting me. I didn't realize how much it was contributing to the compounding issues I was facing with my health.

I never did anything about the discrimination I faced that day, and still haven't because I was scared. This doctor was not only trying to keep me from progressing into a new career field but trying to keep me from serving all together.

Besides talking about it to my therapist, it's something I've continued to struggle with alone, but I now realize I'm not the only one that has lived this experience - and that's not ok; it's time for real change, a culture change. We DO need more; policy change was not enough.

Kathryn "Kat" Goldston (she/her)

white, pansexual, transgender woman

Army Veteran and actively-serving National Guard
Representative Roy (TX-21)

I joined the Army in 2006 and graduated training as a Combat Medic. After Advanced Individual Training, my first duty station was Fort Polk, La where I served with the 115th Combat Support Hospital. We deployed to Iraq and Afghanistan during my first 6 years of my military career. Afterwards I enlisted into the National Guard where I became my engineer unit's Senior Medic, Platoon Sergeant, and Treatment Non-Commissioned Officer.

During 2017, I was also working fulltime as an Army National Recruiter. In June I started my transition to be my authentic self. Coming out to my Commander with the Engineers was difficult but my Commander and First Sergeant were extremely supportive, as were my whole unit. Coming out to Recruiting was a different matter. I came out to the Commander, as directed by regulations, and five days later my orders were cut without warning. I fought back and used the open-door policy to fight this discrimination and talked with the Commander of Recruiting and they brought me back on, long enough that the deadline for filing an EO report had lapsed. I continued my duties with the Engineers until there was a position opening at Fort Hood to be a Medic Instructor. I interviewed well and got the position.

In 2020 I worked at the Audie Murphy VA in San Antonio, Tx where I was a phlebotomist drawing blood for our Veterans. I was outed multiple times by my boss and finally let go because he didn't like having a transgender employee under him. This manager has since been removed from the blood lab and relocated. I am currently having his evaluations removed from my record so I can go back and continue to work for the VA healthcare system.

Afterwards, I was also put on additional orders to work at the Health Support Services with the Texas Army National Guard. Everyone there was extremely supportive of who I was and my work performance. My surgery date had finally come up but for me to get surgery, I had to resign my fulltime orders, even though regulations say we are allowed convalescent leave. Because of this, it left me unemployed after everything I had given. I am currently recovering and trying to get back onto orders so I can provide for my family.

Nathaniel Boehme (he/him)
white, gay, cisgender man
actively-serving Air Force
Representative Blumenauer (OR-3)

My name is Nathaniel Boehme and I've served in the U.S. Air Force in various components since Sept 5, 2001. During the vast majority of my career, I served with my true self hidden, fearful that who I am would mean over a decade of blood, sweat, and tears would be lost or that I'd face harassment, discrimination, or much worse. I identify as a gay, white, cisgender man and until 2011 and well beyond, my identity always hung over my head. When I was deployed to Iraq in 2005/2006, I had to be very careful talking about my personal life, making sure I used gender-neutral pronouns for partners and working diligently to turn the conversation away from home life. My letters and emails home were short, bereft of emotion, and inauthentic. I faced death nearly daily knowing my loved ones may never have the ability to officially mourn my loss or celebrate my life.

In 2009 I was incredibly excited to be selected as the next EO (Equal Opportunity) officer at my Wing and in preparation for nearly a year of training between officer candidate school, follow on training and more, I resigned my position as a graduate student and instructor, moved my possessions into storage, and cancelled my lease. One week before leaving for this training, I was contacted by the new Wing leadership and told that I was not going, and no reason was given.

For nearly six months I was homeless, without health insurance, or any employment. I was never told the reason why my selection was reversed and had been told by multiple sources it had to do with who I was. This was two years before DADT (Don't Ask Don't Tell) was repealed and this irrevocably changed the course of my life. The shadow of DADT continued to hang over my career.

During the repeal I recall overhearing multiple conversations like, "are they going to expect us to room with those fucking faggots [sic]?" This was from someone who is now a Chief Master Sergeant and Superintendent of their section. I did not tell them they already were and had roomed with LGBTQ folks and there wasn't an issue. When I was outed at my unit after the repeal of DADT, our E-9 held a briefing where I was explicitly excluded, and the discussion was about LGBTQ people in the ranks.

Years later in 2017 (six full years after DADT was repealed and two after the Defense of Marriage struck down), I was working to complete my emergency contact information at my unit, and I entered the name of my husband after which I was asked to identify their relationship with me. When I attempted to select spouse, a warning dialogue box popped up telling me I could not identify a man as my spouse.

The screenshot shows a web form titled "Add Another Contact". At the top, it says "You have selected to add a new person to your Record of Emergency Data. Select the relationship this person has with you from the list below." Below this is a "Note: Under the Defense of Marriage Act (DOMA), the Federal Government defines marriage as a legal union between one man and one woman as husband and wife, and the word 'spouse' refers only to a person of the opposite sex who is a husband or wife. However, anyone can be designated on the RED." There is a dropdown menu labeled "Relationship:" with a downward arrow. At the bottom of the form are two buttons: "Save" and "Cancel".

Because of this, I was unable to complete my required military documentation. When my commander approached me about this, I explained the problem. Their answer was that there were cobwebs in the system, and I asked them if ‘cobwebs’ had ever invalidated his marriage in an official government system. He did not have an answer.

The legacy of DADT and the violence it did against my community continues today. There are people who honorably served their nation who may never get the benefits they deserve because of who they are. There are those who took their own life because of the shame that was placed on them from DADT and similar policies. Through my professional work in the State of Oregon, I daily saw the impact of DADT, the ban on trans people serving openly and authentically in the military, and similar policies. While regulations may have been changed and progress has undoubtedly been made, we have a significant way to go before we reach a semblance of equity in military service of LGBTQ people.

Sarah Klimm (she/her)

white, lesbian, transgender woman

Marine Corps Veteran

Representative DeGette (CO-1)

I retired from the Marine Corps on June 30, 2016; the same day then-Secretary of Defense Ash Carter announced the lifting of the transgender military ban. I was rated at 90% disabled and eligible for VA health care. I came out as transgender in my first mental healthcare visit at the VA in September 2016 because I was aware of the VA policy to provide gender-affirming care. This care included therapy and hormonal treatments. I started therapy and working with my VA therapist and VA primary care on hormonal treatment. We approached VA endocrinology for a consult regarding hormone therapy. The consult was denied because the Endocrinology department head was following the Endocrinology Society guidelines written in 2013. Those guidelines stated living in the desired gender before initiating hormone therapy and for that reason would not see me. This denial was not following VA policy and was also a deviation from what other VA locations were doing. I, fortunately, have Tricare benefits which also covered hormone therapy. I used my Tricare benefits to obtain the medically necessary care the VA would not provide. This use of Tricare is at a cost with copays for visits and medications that would otherwise be free at the VA.

In 2019 the Endocrinology Society updated its guidelines to remove the barrier of dressing as your desired gender before initiating hormone therapy. I along with my VA therapist and primary care again approached VA endocrinology for a consult. This is the reply I received.

“Endocrine staff note: Recent published data show significant increase in death rate in MTF transgenders given ET. because there is no acute effects of estrogens -takes 3-5 yrs and is not reversible and is with significant risk, we feel in Endocrinology that the hormonal component of the transition is to be approached after other issues are addressed and the risk benefit can be managed. our veterans are much older than the population on which the guidelines are outlined and with many different risk factors. patients with HTN can be considered for treatment with spironolactone which can cause gynecomastia. There may be other providers in the system that may have alternative opinions but we are concerned about the ultimate health and risk benefit to our patients. Thanks.”

I was now being denied because of my age I was only 44 at the time. I was also being denied without ever being seen. My medical record was not even reviewed since a good portion was with a civilian

provider. The fact I was already on hormone therapy with a civilian provider for almost 2 years was not addressed in their reply. This statement was not following all major medical guidance on treating transgender patients or the VA's policy.

I felt belittled as a transgender veteran. I also felt like my identity was being equated to just breast development by the Endocrinology department with the statement "can be considered for treatment with spironolactone which can cause gynecomastia." I am fortunate that I have Tricare in my instance, but it never left the back of my mind the other Veterans who do not have that option and rely solely on the VA for health care.

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